



COMPARATIVE STUDY OF SELF CONCEPT IN HIV AFFECTED ADOLESCENTS: ON THE BASIS OF GENDER AND RESIDENCE

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ABSTRACT

Population of HIV affected adolescents has been increased day by day. It is important to prevent their problems from childhood. This research focuses on self concept of HIV affected adolescents. Self concept is important psychological component to survive in society. The aim of current study was to examine the effect of residence and gender on self concept of HIV affected adolescents. This was 2 X 2 factorial designs. The sample of 120 having male and female is taken for this study and their age range was 13-19 years. For this study self concept questionnaire by Sarswat was used. Mean, S.D., Two Way ANOVA were used for the analysis of collected data. Researcher concludes that residence factor significantly influence on self concept except educational self concept. Those HIV affected adolescents are lived in urban area; they are high on overall self concept than rural area adolescents.

KEYWORDS: Self Concept, HIV affected adolescents, Residence, Gender.

I. INTRODUCTION:

Adolescence is a developmental stage characterised by physical, mental, behavioral, and sociological changes. Cognitive and behavioral changes are important because they anticipate and foreshadow the psychological and social issues that teenagers will face, forming the groundwork for diverse ways for individuals to respond. Most young people struggle in their early years because psychological growth does not keep pace with physical growth. Turner (1962) and Fonseca (2005) emphasize the demands and problems that adolescence includes, which make this stage of life tough even when secure and healthy. The nature of adolescence is determined by the social expectations mentioned by Turner (1962). Adolescent ways of being and tensions that may arise are influenced by these expectations.

AIDS has risen at an astonishing speed over the world over the years. AIDS first appeared in a few African nations around 1985. By 2005, AIDS had infected practically every country and area on the planet. As a result of AIDS, the adult mortality rate has grown dramatically. HIV is transmitted by contact with HIV-infected blood or other bodily fluids. Contact with an infected person's biological fluids during unprotected sexual intercourse, blood-to-blood contact, and perinatal transmission from affected mother to child are the primary mechanisms of transmission. Children and adolescents are the primary targets of mother-to-child transmission of AIDS, and as a result, a substantial proportion of adolescents lose their parents to AIDS. Because of the normal socioeconomic position of families and individuals in AIDS-infected areas, adolescents who have acquired AIDS through mother-to-child transmission are vulnerable in relation to the physical, mental, and social adaptation.

Self-concept is highly dynamic, beginning in childhood and progressing through the many periods of life and evolution (Freitas, 2009). According to Hattiecit (cited in Freitas, 2009), the most big changes and a much more specific representation of self-concept happen during adolescence. The significance of self-concept stems from the fact that it explains many other psychological variables; it is an indicator to assess the level of adjustment to life and emotional well-being, influencing how people are encouraged, acquire, and achieve desired levels of success in various areas of their presence (Freitas, 2009). This represents their self-constructed perception of how others perceive them and how others judge them. People with a strong self have a favorable perception about themselves and view others less negatively, i.e., they have the greatest coping mechanisms and feel good about themselves and others. The examination of self-concept in adolescence is significant because it predicts much behaviour in varied situations of life, such as family, social, school, and those environments that encompass the group of individuals in our study. According to Vaz Serra (1988), as quoted in Santos (2009, p.6), self-concept has a great influence on everyday life because it is beneficial in judging indications of inappropriate behavior, allowing human behavior to be predicted, and knowing an individual's image of himself.

II. AIM:

This study aims to examine the effect of residence and gender on self concept of HIV affected adolescents.

III. OBJECTIVES:

1. To measure the main effect of Gender (A) Male and female and residence (B) Hostel and House on various aspects of self concept (Physical, Social,

educational,) among HIV affected adolescents.

2. To assess the interactional effect of residence and gender on various aspects of self concept (Physical, Social, educational,) among HIV affected adolescents.
3. To evaluate the main effect Gender (A) Male and female and residence (B) Hostel and House on overall self concept among HIV affected adolescents.
4. To assess the interactional effect of residence and gender on overall self concept among HIV affected adolescents.

IV. HYPOTHESIS:

1. There is no significant main effect of Gender (A) Male and female and residence (B) Hostel and House on various aspects of self concept (Physical, Social, educational) among HIV affected adolescents.
2. There is no significant interactional effect of residence and gender on various aspects of self concept (Physical, Social, educational) among HIV affected adolescents.
3. There is no significant main effect Gender (A) Male and female and residence (B) Hostel and House on overall self concept among HIV affected adolescents.
4. There is no significant interactional effect of residence and gender on overall self concept among HIV affected adolescents.

V. MATERIALS AND METHOD:

A) Sample:

By using purposive sampling method, 120 HIV affected adolescents were selected from Kolhapur city. In this sample 60 HIV affected adolescents belong to urban area and remaining 60 HIV affected adolescents belong to rural. The sample of 120 having male and female ratio 1:1 is taken for this study. Age range of participants was 13-19 years.

B) Tool: (Self concept Inventory, Sarswat 2011)

Sarswat invented the self-concept questionnaire (SCQ). The questionnaire was administered to 1000 students (male and female) from 20 Delhi secondary schools. There are 48 things in the inventory. It offers six distinct levels of self-concept: physical, social, temperamental, educational, moral, and intellectual. It also provides a total score for self-concept. There are eight objects in each dimension. As a result, the inventory holds a total of 48 things. It also provides a total score for self-concept. The test-retest method was used to determine the inventory's reliability, which was determined to be 0.91 for the whole self-concept measure. The reliability coefficients of its different dimensions range from 0.67 to 0.88.

C) Variables:

Independent variable- 1. Gender

a. Male

b. Female

2. Residence

a. Urban

b. Rural

Dependent variable- Self Concept

D) Statistical analysis:

The acquired data was analyzed using means, standard deviations, and 2X2 ANOVA.

E) Procedure of data collection:

For data collection prior permissions of director of hostels were asked. Researcher was personally approached for collecting data of HIV affected adolescents from hostel and house. After establishing pleasant rapport, the self concept inventory was administered to adolescents of hostel and house. Instructions were given carefully to get complete responses. It was seen carefully whether the respondents give response to all statements or not. After the administration of the tool to the selected samples the scoring of the test was done strictly as per the respective manual.

VI. RESULTS AND DISCUSSION:**Table: 1 Means and S.D's Self Concept Scores of HIV affected adolescents with respect to Residence & Gender**

Factor	N	A ₁ B ₁		A ₂ B ₁		A ₁ B ₂		A ₂ B ₂	
		Mean	SD	Mean	SD	Mean	SD	Mean	SD
Physical	100	30.43	1.61	30.66	1.49	29.83	1.28	29.66	1.32
Social	100	31.06	1.33	30.86	1.38	30.13	1.19	29.96	1.60
Educational	100	29.56	1.65	29.26	2.34	28.9	1.47	28.66	1.91
Total	100	91.06	4.60	90.8	5.22	88.86	3.95	88.3	4.84

(A- Gender, B- Residence, A₁B₁- Urban Male, A₂B₁- Rural Male, A₁B₂- Urban Girls, A₂B₂- Rural Girls)

Table: 2 Summary of Two-way ANOVA for Mean Physical Self Concept Scores of HIV affected adolescents with respect to Residence and Gender

Source	DF	Sum of Square (SS)	Mean Square (MS)	F Statistic (df, df ₂)	P-value
Gender	1	0.03333	0.03333	0.01619 (1,116)	0.899
Residence	1	19.2	19.2	9.324 (1,116)	0.0028*
Gender X Residence	1	1.2	1.2	0.5828 (1,116)	0.4468
Error	116	238.8667	2.0592		
Total	119	259.3	2.179		

**0.01

A two-way ANOVA was performed to analyze the effect of residence and gender on physical self concept of HIV affected adolescents. A two-way ANOVA revealed that there was not a statistically significant interaction between the effects of residence and gender ($F(1, 116) = 0.582, p = .446$). Simple main effects analysis showed that gender did not have a statistically significant effect on physical self concept ($p = .899$). Simple main effects analysis showed that residence did have a statistically significant effect on physical self concept ($p < .000$).

Table: 3 Summary of Two-way ANOVA for Mean Social Self Concept Scores of HIV affected adolescents with respect to Residence and Gender

Source	DF	Sum of Square (SS)	Mean Square (MS)	F Statistic (df, df ₂)	P-value
Gender	1	1.0083	1.0083	0.5227 (1,116)	0.4711
Residence	1	25.2083	25.2083	13.0679 (1,116)	0.0004457
Gender X Residence	1	0.008333	0.008333	0.00432 (1,116)	0.9477
Error	116	223.7667	1.929		
Total	119	249.9917	2.1008		

**0.01

A two-way ANOVA was performed to analyze the effect of residence and gender on social self concept of HIV affected adolescents. A two-way ANOVA revealed that there was not a statistically significant interaction between the effects of residence and gender ($F(1, 116) = 0.004, p = .947$). Simple main effects analysis showed that gender did not have a statistically significant effect on social self concept ($p = .471$). Simple main effects analysis showed that residence did have a statistically significant effect on social self concept ($p < .000$).

Table: 4 Summary of Two-way ANOVA for Mean Educational Self Concept Scores of HIV affected adolescents with respect to Residence and Gender

Source	DF	Sum of Square (SS)	Mean Square (MS)	F Statistic (df, df ₂)	P-value
Gender	1	2.1333	2.1333	0.6056 (1,116)	0.438
Residence	1	12.0333	12.0333	3.4162 (1,116)	0.06711
Gender X Residence	1	0.03333	0.03333	0.00946 (1,116)	0.9227
Error	116	408.6	3.5224		
Total	119	422.8	3.5529		

A two-way ANOVA was performed to analyze the effect of residence and gender on educational self concept of HIV affected adolescents. A two-way ANOVA revealed that there was not statistically significant interaction between the effects of residence and gender ($F(1, 116) = 0.009, p = .922$). Simple main effects analysis showed that gender did not have a statistically significant effect on physical self concept ($p = 0.438$). Simple main effects analysis showed that residence did not have a statistically significant effect on educational self concept ($p = 0.06$).

Table: 5 Summary of Two-way ANOVA for Mean Total Self Concept Scores of HIV affected adolescents with respect to Residence and Gender

Source	DF	Sum of Square (SS)	Mean Square (MS)	F Statistic (df, df ₂)	P-value
Gender	1	5.2083	5.2083	0.7437 (1,116)	0.3903
Residence	1	165.675	165.675	23.6552 (1,116)	0.000003*
Gender X Residence	1	0.675	0.675	0.09638 (1,116)	0.7568
Error	116	812.4333	7.0037		
Total	119	983.9917	8.2688		

**0.01

A two-way ANOVA was performed to analyze the effect of residence and gender on total self concept of HIV affected adolescents. A two-way ANOVA revealed that there was not a statistically significant interaction between the effects of residence and gender ($F(1, 116) = 0.09, p = .756$). Simple main effects analysis showed that gender did not have a statistically significant effect on physical self concept ($p = .390$). Simple main effects analysis showed that residence did have a statistically significant effect on overall self concept ($p < .000$).

VI. CONCLUSION:

Finally, researcher conclude that residence factor significantly influence on self concept except educational self concept. Those HIV affected adolescents are lived in urban area; they are high on physical self concept. Adolescents are interact with family members, discuss with each other and they are supported by their family members and friends in every problem that's why they are high on social self concept. In result, HIV affected adolescents who lived in urban area, differ significantly from those who are lived in rural area.

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